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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Timothy First name  M Middle name  McCombie Last name and Suffix (Sr., Jr., II, III)	Jennifer First name  L Middle name  McCombie Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4417	xxx-xx-0380

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Debtor 1 Timothy M McCombie
Debtor 2 Jennifer L McCombie

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs	
5.	Where you live	12553 Oakton Road	If Debtor 2 lives at a different address:	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code	
		Carroll		
		County	County	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code	
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	

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**Timothy M McCombie** Debtor 1 Debtor 2 Jennifer L McCombie Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. Northern District of 12/29/09 09-75684 District Illinois When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you When District Case number, if known Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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Der	Jennifer L McCon	nbie			Case number (if known)			
Par	t 3: Report About Any Bu	ısinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code			
	it to this petition.		Checi	k the appropriate bo	ox to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))			
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	dicate that you are ow statement, and t	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am r	not filing under Char	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	· Have Anv	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention			
	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	☐ Yes.						
	of imminent and	<b>□</b> 165.	What is	the hazard?				
	identifiable hazard to public health or safety?							
	Or do you own any		If immed	liate attention is				
	property that needs immediate attention?			why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code			
					Number, Street, City, State & Zip Code			

Debtor 1

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Debtor 1 Timothy M McCombie
Debtor 2 Jennifer L McCombie Case number (if known)

#### Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-82688 Doc 1 Filed 11/15/16 Entered 11/15/16 16:33:07 Desc Main Document Page 6 of 60

**Timothy M McCombie** Debtor 1 Debtor 2 Jennifer L McCombie Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." □ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million **□** \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Timothy M McCombie /s/ Jennifer L McCombie **Timothy M McCombie** Jennifer L McCombie Signature of Debtor 1 Signature of Debtor 2 Executed on November 15, 2016 Executed on November 15, 2016

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Debtor 2	Timothy M McCor Jennifer L McCon		Cas	se number (if known)	
•	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify the control of the contro	ed States Code, and have	explained the relief avail	able under each chapter
•	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.			
		/s/ Tiffany E. Rodriguez	Date	November 15, 20 <sup>2</sup>	16
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Tiffany E. Rodriguez Printed name			
		Barrick, Switzer, Long, Balsley & Van	Evera, LLP		
		6833 Stalter Drive			

Rockford, IL 61108
Number, Street, City, State & ZIP Code
Contact phone 815-962-6611

Bar number & State

Email address

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De	btor 2 Jennifer L McCor	nbie		Case number	(if known)
Pai	t 6: Answer These Ques	tions for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		mer debts? Consumer debts are define , family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.	Are your debts primarily busine money for a business or investme	ess debts? Business debts are debts the ent or through the operation of the busine	at you incurred to obtain
			☐ No. Go to line 16c.	• • • • • • • • • • • • • • • • • • • •	
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe th	nat are not consumer debts or business	debts
17.	Are you filing under	■ No.	I am not filing under Chapter 7. G	a to line 18.	
	Chapter 7?	<b>—</b> 140.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availabl ☐ No ☐ Yes	u estimate that after any exempt propert e to distribute to unsecured creditors?	ty is excluded and administrative expenses
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000
		☐ 100-19 ☐ 200-99	<del>-</del>	☐ 10,001-25,000	☐ More than 100,000
19.	How much do you estimate your assets to	□ \$0 - \$5	The state of the s	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	be worth?	<b>\$100,0</b>	1 - \$100,000 01 - \$500,000 01 - \$1 million	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities	□ \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?	<b>\$100,0</b>	11 - \$100,000 01 - \$500,000 01 - \$1 million	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
art	7: Sign Below				
ог у	/ou	I have exa	mined this petition, and I declare u	nder penalty of perjury that the informati	on provided is true and correct.
		If I have ch	osen to file under Chapter 7. I am	aware that I may proceed, if eligible, univailable under each chapter, and I choos	der Chapter 7 11 12 or 13 of title 11
		If no attorn document,	ey represents me and I did not pay I have obtained and read the notic	y or agree to pay someone who is not an e required by 11 U.S.C. § 342(b).	attorney to help me fill out this
		I request re	elief in accordance with the chapte	r of title 11, United States Code, specifie	d in this petition.
		I understar bankruptcy and 3571.	nd making a false statement, conce case can result in fines up to \$250	ealing property, or obtaining money or pr 0,000, or imprisonment for up to 20 year	s, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Timothy Signature	M McCombie of Debtor 1	Jennifer L NicComi Signature of Debtor 2	McCamba
		Executed o	MM/DD/YYYY 8 (3)	Executed on MM / D	6 813/16

Debtor 1 Timothy M McCombie

Fill in this infor	mation to identify your	case:		
Debtor 1	Timothy M McCor	mbie		
	First Name	Middle Name	Last Name	
Debtor 2	Jennifer L McCon	nbie		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is an
				amended filing

#### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney	to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	Attach Benkruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the summar that they are true and correct.	y and schedules filed with this declaration and
Timothy M McCombie Signature of Debtor 1	X Junifer & McCamble 83  Jennifer L McCombie  Signature of Debtor 2
Date Market 6	Date Park 1996

	otor :	Case 16-82688  Timothy M McCombie	Doc 1 F		Entered 11/1 Page 10 of 60	5/16 16:33:07	Desc Main
	otor 2				Cas	e number (if known)	
25.	Hav	re you notified any governme	ental unit of an	release of hazardo	ue material?		
25.			nital unit of any	y release of flazardo	us material r		
		No Yes. Fill in the details.					
	_	me of site		Governmental un	it	Environmental law, if y	ou Date of notice
		dress (Number, Street, City, State at	nd ZIP Code)	Address (Number, S ZIP Code)		know it	
26.	Hav	e you been a party in any jud	dicial or admini	strative proceeding	under any environn	nental law? Include set	tlements and orders.
		No Yes. Fill in the details.					
		se Title se Number		Court or agency Name Address (Number, S State and ZIP Code)		ure of the case	Status of the case
Par	t 11:	Give Details About Your B	usiness or Co	nnections to Any Bu	siness	W. 18 1	
27.	Wit	hin 4 years before you filed f	or bankruptcy,	did you own a busir	ness or have any of	the following connection	ons to any business?
		☐ A sole proprietor or self-	employed in a	trade, profession, o	r other activity, eithe	er full-time or part-time	•
		☐ A member of a limited lia	ability company	(LLC) or limited lia	bility partnership (L	LP)	
		A partner in a partnershi	p				
		🗖 An officer, director, or m	anaging execu	tive of a corporation	1		
		☐ An owner of at least 5%	of the voting o	r equity securities of	a corporation		
		No. None of the above appl	ies. Go to Part	12.			
		Yes. Check all that apply at	ove and fill in	the details below for	each business.		
		siness Name dress	De	escribe the nature of	the business	Employer Identification	on number Security number or ITIN.
	(Nu	mber, Street, City, State and ZIP Code	) Na	ame of accountant o	r bookkeeper	Dates business existe	-
28.		hin 2 years before you filed fo itutions, creditors, or other p		did you give a finan	cial statement to an	yone about your busin	ess? Include all financial
		No Yes. Fill in the details below	v.				
	Na		Da	ate Issued			
		dress mber, Street, City, State and ZIP Code;	)				
Par	t 12:	Sign Below					
are t	rue a ba	ad the answers on this State and correct. I understand the ankruptcy case can result in . §§ 152, 1341, 1519, and 357	at making a fals fines up to \$25 1.	se statement, conce 0,000, or imprisonm	aling property, or ob ent for up to 20 year	staining money or prop rs, or both.	
		y M McCombie re of Debtor 1	13/16	Jennifer LiM Signature of D	L J. McC cCombie Debtor 2	inte	
Dat	e <u> </u>	8/3/	16	Date A	8/3/	16	
Did ;	0	attach additional pages to Yo	our Statement (	of Financial Affairs f			al Form 107)?
Did y		pay or agree to pay someone	who is not an	attorney to help you	ı fill out bankruptcy	forms?	
□ Y	es. N	lame of Person Attach	• •	Petition Preparer's Notes of Financial Affairs for		nd Signature (Official For	****
-IIIU	01	*** ****	-www.meilt	manager milena (VI			page 6

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Document Page 11 of 60 **Timothy M McCombie** Debtor 1 Jennifer L McCombie Debtor 2 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 6 16b. Fill in the number of people in your household. 103,721.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 6,368.92 18. Copy your total average monthly income from line 11. 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 -\$ 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 6,368.92 19b. Subtract line 19a from line 18. Calculate your current monthly income for the year. Follow these steps: 6,368.92 20a. Copy line 19b x 12 Multiply by 12 (the number of months in a year). 76,427,04 20b. The result is your current monthly income for the year for this part of the form 103,721.00 20c. Copy the median family income for your state and size of household from line 16c

#### 21. How do the lines compare?

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4:

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

Timothy M McCombie Signature of Debtor 1

Date MM / DD / YYYY Signature of Debtor 2

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

#### United States Bankruptcy Court Northern District of Illinois

In re	Timothy M McCombie Jennifer L McCombie	Debtor(s)	Case No. Chapter 13	
		Debiol(s)	Chapter 10	
	VERI	FICATION OF CREDITOR N	<b>IATRIX</b>	
		Number of	f Creditors:	10
	The above-named Debtor(s) her (our) knowledge.	reby verifies that the list of credi	itors is true and correct to	the best of my
Date:	8/3/16	Timothy M McCombie Signature of Debtor	6	
Date:		Jennifer L McCombie Signature of Debtor	Cambe	

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	<u> Docume</u>	nt Page 13 of 60	
nation to identify your	case:		
Timothy M McCo	mbie		
First Name	Middle Name	Last Name	
Jennifer L McCor	nbie		
First Name	Middle Name	Last Name	
nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Timothy M McCon First Name  Jennifer L McCon First Name	Timothy M McCombie First Name Middle Name  Jennifer L McCombie First Name Middle Name	Timothy M McCombie  First Name Middle Name Last Name  Jennifer L McCombie  First Name Middle Name Last Name

Check if this is an amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	115,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,300.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	116,300.00
Paı	t 2: Summarize Your Liabilities		
			i <b>abilities</b> at you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	114,017.74
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	18,292.0
	Your total liabilities	\$	132,309.79
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,315.7
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,130.0
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bousehold purpose "11 LLS C. & 101(8). Fill out lines 8-9g for statistical purposes. 28 LLS C. & 159		, family, or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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		Document	Page 14 01 00
Debtor 1	Timothy M McCombie		3
Debtor 2	Jennifer L McCombie		Case number (if known)

_			
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	_	6 369 03
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$	6,368.92

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	Ca	se 16-82688	3 Doc 1	Filed 11/15/16  Document	Entered 11/15/16 Page 15 of 60	6 16:33:07	Desc	Main
Fill	in this inform	nation to identify	your case and t					
Deb	tor 1	Timothy M N	IcCombie					
	_	First Name	Midd	e Name	Last Name			
	tor 2 use, if filing)	Jennifer L M		e Name	Last Name			
				RN DISTRICT OF ILLI				
_							_	
Cas	e number				_			Check if this is an amended filing
SC n eac hink nfori	chedule ch category, se it fits best. Be mation. If more rer every quest	e as complete and a e space is needed, a tion.	coperty escribe items. List accurate as possib attach a separate s	le. If two married peopl sheet to this form. On th	an asset fits in more than one of e are filing together, both are e he top of any additional pages, wn or Have an Interest In	qually responsible	e for suppl	ying correct
_	No. Go to Part Yes. Where is							
1.1				What is the propert	y? Check all that apply			
	12553 Oak Street address, if	t <b>ton Road</b> f available, or other des	cription	□ '	home Iti-unit building I or cooperative	the amount of any	secured cla	s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
	Savanna	IL	61074-0000	☐ Manufactured☐ Land	or mobile home	Current value of entire property?		current value of the ortion you own?
	City	State	ZIP Code	☐ Investment pr	operty	\$115,000	0.00	\$115,000.00
				☐ Timeshare ☐ Other ☐ Who has an interes ☐ Debtor 1 only	t in the property? Check one		ole, tenanc	ownership interest y by the entireties, or
	Carroll			Debtor 2 only				
	County			■ Debtor 1 and	Debtor 2 only	☐ Check if this	is commu	nity property
					of the debtors and another  ou wish to add about this item  on number:	(see instructions		
					from Part 1, including any e			\$115,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Entered 11/15/16 16:33:07 Case 16-82688 Filed 11/15/16 Page 16 of 60 Document **Timothy M McCombie** Debtor 1 Debtor 2 Jennifer L McCombie Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Hyundai 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Sonata Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 2012 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: ■ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$0.00 \$0.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Living room set, bedroom set, kitchen table, and normal \$1,000.00 complement of household goods and furnishings. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... television, cell phones, \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe.....

Doc 1

Official Form 106A/B Schedule A/B: Property page 2

Desc Main

Dobtor 1	Case 16-82688 Timothy M McCombie	Doc 1	Filed 11/15/16 Document	Entered 11/15/16 16:33:07 Page 17 of 60	Desc Main
Debtor 1 Debtor 2	Jennifer L McCombie			Case number (if know	n)
■ No	ms  ples: Pistols, rifles, shotguns  Describe	, ammunition	, and related equipment		
■ No	ples: Everyday clothes, furs,  Describe	leather coats	, designer wear, shoes,	accessories	
■ No		ume jewelry, e	engagement rings, wedd	ding rings, heirloom jewelry, watches, gems	, gold, silver
Exam ■ No	arm animals ples: Dogs, cats, birds, horse Describe	es			
■ No	ther personal and househo	-	did not already list, ir	ncluding any health aids you did not list	
	the dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$1,300.00
	escribe Your Financial Assets wn or have any legal or equ	uitable intere	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ples: Money you have in you			sit box, and on hand when you file your per	tition
	, ., .,		accounts; certificates counts with the same ins	f deposit; shares in credit unions, brokerag itution, list each.	e houses, and other similar
			Institution n	ame:	
Exam	s, mutual funds, or publicly ples: Bond funds, investment			ey market accounts	
■ No □ Yes.	In	stitution or is:	suer name:		
joint v	ublicly traded stock and in venture	terests in inc	corporated and uninco	orporated businesses, including an inter	est in an LLC, partnership, and
■ No □ Yes.	Give specific information ab	oout them e of entity:		% of ownership:	
Negot	nment and corporate bond tiable instruments include per negotiable instruments are the	rsonal checks	s, cashiers' checks, pror	nissory notes, and money orders.	

Official Form 106A/B Schedule A/B: Property page 3

Issuer name:

Case 16-82688 Doc 1 Filed 11/15/16 Entered 11/15/16 16:33:07 Desc Main Page 18 of 60 Document **Timothy M McCombie** Debtor 1 Debtor 2 Jennifer L McCombie Case number (if known) 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Official Form 106A/B Schedule A/B: Property

	Case 16-82688	Doc 1	Filed 11/15/16	Entered 11/15/16 16:33:0	7 Desc Main
Debtor 1	Timothy M McCombie	)	Document	Page 19 of 60	
Debtor 2	Jennifer L McCombie			Case number (if kno	wn)
If you a some o	terest in property that is deare the beneficiary of a living one has died.  Give specific information			ed surance policy, or are currently entitled to	receive property because
Exam <sub>p</sub> ■ No	against third parties, who bles: Accidents, employment Describe each claim			it or made a demand for payment s to sue	
■ No	contingent and unliquidate  Describe each claim	ed claims of	every nature, includin	g counterclaims of the debtor and right	s to set off claims
25 Am. fin	oneial acceto vev did not	alvaadu liat			
35. Any fin	nancial assets you did not	aiready list			
	Give specific information				
				ny entries for pages you have attached	\$0.00
Part 5: De	scribe Any Business-Related	Property You	Own or Have an Interest	In. List any real estate in Part 1.	
37. <b>Do vou</b> o	own or have any legal or equi	table interest	in any business-related p	roperty?	
	to Part 6.		. ,		
☐ Yes. G	Go to line 38.				
	scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Interest In.	
46. <b>Do yo</b> u	ı own or have any legal or	equitable in	iterest in any farm- or o	commercial fishing-related property?	
■ No.	Go to Part 7.		•		
☐ Yes	. Go to line 47.				
Part 7:	Describe All Property You (	Own or Have a	nn Interest in That You Did	d Not List Above	
Examp ■ No	I have other property of ar oles: Season tickets, country				

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

\$0.00

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**Timothy M McCombie** Debtor 1 Debtor 2 Jennifer L McCombie Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$115,000.00 Part 2: Total vehicles, line 5 56. \$0.00 Part 3: Total personal and household items, line 15 57. \$1,300.00 Part 4: Total financial assets, line 36 58. \$0.00 Part 5: Total business-related property, line 45 \$0.00 59. Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$1,300.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Part 7: Total other property not listed, line 54

\$116,300.00

\$1,300.00

	Case	10-02000 D0C	Document		Page 21 of 60	5.07 Desc Main
Fil	l in this informati	on to identify your case			AUE / LUI UU	
De	btor 1	Timothy M McCombie	<u> </u>			
		irst Name	Middle Name	L	ast Name	
		Jennifer L McCombie	Middle Name	1	ast Name	
	· · · · · · · · · · · · · · · · · · ·					
Un	ited States Bankru	uptcy Court for the: NC	ORTHERN DISTRICT OF	ILLING	<u> </u>	
	se number					Charle if this is an
(11 K	nowny					☐ Check if this is an amended filing
_		4000				
	ficial Form					
S	chedule	C: The Prop	erty You Cla	im	as Exempt	4/16
the nee cas	property you listed ded, fill out and at e number (if know	d on <i>Schedule A/B: Prope</i> tach to this page as many n).	erty (Official Form 106A/B) copies of Part 2: Addition	as yo nal Pa	our source, list the property that you ige as necessary. On the top of any	additional pages, write your name and
spe any fun exe	cific dollar amou applicable statu ds—may be unlir	nt as exempt. Alternativ tory limit. Some exempt nited in dollar amount. I cular dollar amount and	rely, you may claim the f ions—such as those for However, if you claim an	ull fai healt exen	ir market value of the property be th aids, rights to receive certain b option of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement le under a law that limits the t, your exemption would be limited
Pa	rt 1: Identify th	ne Property You Claim a	s Exempt			
1.	Which set of exc	emptions are you claimi	ng? Check one only, eve	n if yo	our spouse is filing with you.	
	■ You are claimi	ing state and federal nont	pankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	_	ing federal exemptions.				
2				mnt	fill in the information below.	
	Brief description of	of the property and line on lists this property	Current value of the portion you own	- '	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	12553 Oakton	Road Savanna, IL	\$115,000.00		\$15,000.00	735 ILCS 5/12-901
	61074 Carroll		Ψ110,000.00	_		
	Line from Schedu	ule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2012 Hyundai		\$0.00		\$0.00	735 ILCS 5/12-1001(c)
	Line from Schedu	uie A/B: <b>3.1</b>			100% of fair market value, up to	
					any applicable statutory limit	
	Living room se	et, bedroom set,	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
	complement o	f household goods a	nd		100% of fair market value, up to	
	furnishings. Line from Schedu	ule A/B: <b>6.1</b>			any applicable statutory limit	
	Line from Ochedo					
3.			on of more than \$160,37		led on or after the date of adjustme	nt )

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

☐ Yes

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Filli	in this information to identify you		ue // ur ou		
Deb	tor 1 Timothy M McC				
Dob	First Name tor 2 Jennifer I McCo		Name		
	tor 2 Jennifer L McCo		Name	-	
Unit	ed States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	6	_	
Case (if kno	e number <sub></sub>				if this is an ded filing
Offi	icial Form 106D				
	<del>-</del>	Who Have Claims Sec	cured by Propert	У	12/15
is nee		If two married people are filing together, bo out, number the entries, and attach it to this			
1. Do	any creditors have claims secured by	your property?			
ı	$\square$ No. Check this box and submit the	nis form to the court with your other scheo	dules. You have nothing else	to report on this form.	
ı	Yes. Fill in all of the information	below.			
Part	List All Secured Claims				
for ea	ach claim. If more than one creditor has	nore than one secured claim, list the creditor s a particular claim, list the other creditors in Pa cal order according to the creditor's name.		Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	AmeriHome Mortgage	Describe the property that secures the cla	nim: \$114,017.74	\$115,000.00	\$0.00
	Creditor's Name	12553 Oakton Road Savanna, IL 61074 Carroll County	——————————————————————————————————————		
	PO Box 77404	As of the date you file, the claim is: Check a apply.	all that		
	Trenton, NJ 08628	Contingent			
	Number, Street, City, State & Zip Code	Unliquidated			
Who	owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_	Debtor 1 only	☐ An agreement you made (such as mortga	age or secured		
	Debtor 2 only	car loan)	<b>3</b>		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	's lien)		
	at least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a community debt	Other (including a right to offset)	t Mortgage		
Date	e debt was incurred	Last 4 digits of account number	1026		
	Hyundai Motor Finance				
2.2	Co.	Describe the property that secures the cla	nim: \$0.00	\$0.00	\$0.00
	Creditor's Name	2012 Hyundai Sonata			
	10550 Talbert Avenue Fountain Valley, CA 92708	As of the date you file, the claim is: Check apply.  ☐ Contingent	all that		
	Number, Street, City, State & Zip Code	☐ Unliquidated			
	4. 110 -	☐ Disputed			
	o owes the debt? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only Debtor 2 only		ige or secured		
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	's lien)		
	At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
Пο	Check if this claim relates to a community debt	Other (including a right to offset)			

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Debtor 1	Timothy M McCombie Ca				Case number (if know)			
	First Name	Middle Name	Last Name					
Debtor 2	Jennifer L McCon	nbie						
	First Name	Middle Name	Last Name					
Date debt	was incurred	La	st 4 digits of account number		-			
2.3 <b>Ne</b>	w Castle Home Loa	ans Describe	the property that secures the claim:		\$0.00	\$115,000.00	\$0.00	
Cred	litor's Name	12553 C	Dakton Road Savanna, IL					
170	00 West Cortland	61074	Carroll County					
Str	eet	A = = 6 4 h =	date you file, the claim is: Check all that					
Sui	ite 207	apply.	date you file, the claim is: Check all that	I				
Ch	icago, IL 60622	☐ Contin	gent					
Num	ber, Street, City, State & Zip C	ode Unliqu	idated					
Who owe	es the debt? Check one.	☐ Disput	ed <b>f lien.</b> Check all that apply.					
☐ Debtor	1 only	_	reement you made (such as mortgage or	r secured				
☐ Debtor	•	car lo	, , ,					
■ Debtor	1 and Debtor 2 only	☐ Statuto	ory lien (such as tax lien, mechanic's lien	n)				
☐ At leas	t one of the debtors and a	nother	ent lien from a lawsuit					
	if this claim relates to a nunity debt	☐ Other	(including a right to offset)					
Date debt	was incurred	La	st 4 digits of account number		-			
Add the	dollar value of your ent	ries in Column A or	this page. Write that number here:		\$114,017.	74		
	the last page of your fo at number here:	rm, add the dollar v	value totals from all pages.		\$114,017.	74		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 24 of 60		
Fill in this infor	mation to identify your ca	se:			
Debtor 1	Timothy M McComb	oie			
	First Name	Middle Name	Last Name		
Debtor 2	Jennifer L McComb				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Case number (if known)				☐ Check i	f this is an ed filing
Official Fori		o Have Unsecured	Claims		12/15
any executory con Schedule G: Exec Schedule D: Credi left. Attach the Co name and case nu	ntracts or unexpired leases the utory Contracts and Unexpire itors Who Have Claims Secure ntinuation Page to this page.	at could result in a claim. Also I d Leases (Official Form 106G). I d by Property. If more space is If you have no information to re	FY claims and Part 2 for creditors list executory contracts on Sched Do not include any creditors with needed, copy the Part you need, port in a Part, do not file that Part	ule A/B: Property (Official Forn partially secured claims that ar fill it out, number the entries in	n 106A/B) and on re listed in the boxes on the
1. Do any credit	tors have priority unsecured c	laims against you?			
No. Go to	Part 2.				
☐ Yes.					
	All of Your NONPRIORITY	Unsecured Claims			
Yes.  4. List all of you unsecured cla	ur nonpriority unsecured clain im, list the creditor separately fo	r each claim. For each claim listed	your other schedules.  ne creditor who holds each claim. d, identify what type of claim it is. Do have more than three nonpriority un	not list claims already included i	n Part 1. If more
Part 2.				Total	l alaim
				Iota	l claim
	ced Radiology ity Creditor's Name	Last 4 digits of acc	count number 8221		\$82.00
615 Va Suite 2	lley View Drive	When was the deb	t incurred?		
	Street City State Zlp Code urred the debt? Check one.	As of the date you	file, the claim is: Check all that app	ply	
☐ Debto	or 1 only	☐ Contingent			
■ Debto	-	☐ Unliquidated			
	or 1 and Debtor 2 only	☐ Disputed			
_	or it and Deptor 2 only list one of the debtors and anoth	- '	RITY unsecured claim:		
	k if this claim is for a commu		Janes and Julian		
debt	in subject to offset?	ility	ng out of a separation agreement or	divorce that you did not	
■ No	545,000 to 511500		n or profit-sharing plans, and other s	imilar debts	
☐ Yes		•	Medical Services		
⊔ Yes		Other. Specify	MEGICAL DEL VICES		

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Debtor 1 Timothy M McCombie

Jennifer L McCombie	Case number (if know)	
Advanced Radiology	Last 4 digits of account number	\$103.00
Nonpriority Creditor's Name c/o Quad Corporation PO Box 2020 Davenport, IA 52809	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Capital One Bank (USA), N.A.	Last 4 digits of account number 0231	\$1,279.20
Nonpriority Creditor's Name PO Box 6492	When was the debt incurred?	·
Carol Stream, IL 60197-6492 Number Street City State Zlp Code	As of the date were file the elements OL	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
■ Debtor 2 only	Contingent	
_	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Cardmember Service	Last 4 digits of account number 0088	\$5,536.30
Nonpriority Creditor's Name PO Bolx 790084	When was the debt incurred?	
Saint Louis, MO 63179-0084  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

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Debtor Debtor	Timothy M McCombie Jennifer L McCombie	Case number (if know)	
4.5	CGH Medical Center	Last 4 digits of account number	\$651.50
	Nonpriority Creditor's Name PO Box 739 Moline, IL 61265	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	CGH Medical Center	Last 4 digits of account number	\$283.51
	Nonpriority Creditor's Name 101 E. Miller Road Sterling, IL 61081	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.7	FHN Central Business Office	Last 4 digits of account number 3633	\$212.88
	Nonpriority Creditor's Name PO Box 268 Freeport, IL 61032	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	

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	Timothy M McCombie Jennifer L McCombie	Case number (if know)	
4.8	FHN Central Business Office Nonpriority Creditor's Name	Last 4 digits of account number	\$31.42
	PO Box 268 Freeport, IL 61032	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Accounts ending in 165, 192, 273, 191 and 199	
4.9	FHN Memorial Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$651.47
	PO Box 857 Freeport, IL 61032	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	FHN Memorial Hospital	Last 4 digits of account number	\$997.62
<u> </u>	Nonpriority Creditor's Name	<del></del>	
	PO Box 857 Freeport, IL 61032	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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	Timothy M McCombie Jennifer L McCombie	Case number (if know)	
	FHN Memorial Hospital	Last 4 digits of account number	\$24.39
	Nonpriority Creditor's Name PO Box 857	When was the debt incurred?	
-	Freeport, IL 61032  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneck an that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
-	FHN Memorial Hospital	Last 4 digits of account number	\$100.21
	Nonpriority Creditor's Name PO Box 857 France II 61032	When was the debt incurred?	
-	Freeport, IL 61032 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.1	FHN Memorial Hospital	Last 4 digits of account number	\$145.91
	Nonpriority Creditor's Name PO Box 857	When was the debt incurred?	
	Freeport, IL 61032  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The state year me, and statement of took all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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	or 1 Timothy M McCombie Jennifer L McCombie	Case number (if know)	
4.1 4	FHN Memorial Hospital	Last 4 digits of account number	\$947.86
	Nonpriority Creditor's Name PO Box 857	When was the debt incurred?	
	Freeport, IL 61032  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	. ,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.1 5	FHN Memorial Hospital	Last 4 digits of account number	\$602.06
	Nonpriority Creditor's Name PO Box 857	When was the debt incurred?	
	Freeport, IL 61032  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 6	J.C. Christensen & Associates, Inc.  Nonpriority Creditor's Name	Last 4 digits of account number K211	\$1,360.68
	PO Box 519	When was the debt incurred?	
	Sauk Rapids, MN 56379-0519		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only		
	Debtor 2 only	Contingent	
	<u> </u>	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Original Creditor FHN (various accounts)	

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Debtor 1 Timothy M McCombie Debtor 2 Jennifer L McCombie Case number (if know) 4.1 J.C. Christensen & Associates, Inc. V670 \$1,268,13 Last 4 digits of account number Nonpriority Creditor's Name PO Box 519 When was the debt incurred? Sauk Rapids, MN 56379-0519 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Original Creditor - FHN accounts ending in Other. Specify 0059, 3069, 9186 and 8115 ☐ Yes \$3,469.00 **Mercy Medical Center Clinton** Last 4 digits of account number Nonpriority Creditor's Name Box 830913 When was the debt incurred? Birmingham, AL 35283 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **NelNet** Unknown Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed ■ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Timothy M McCombie Debtor 2 Jennifer L McCombie Case number (if know) 4.2 \$111.23 RRCA Accounts Management, Inc. 001H Last 4 digits of account number 0 Nonpriority Creditor's Name 201 E. 3rd Street When was the debt incurred? Sterling, IL 61081-3611 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Original Creditor - Morrisoin Community** Other. Specify ☐ Yes Hospital 4.2 Thomson Fire Protection Dist. \$433.68 Last 4 digits of account number Nonpriority Creditor's Name **PO Box 260** When was the debt incurred? Mendota, IL 61342-0260 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Business Revenue Systems, Inc.** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 13077 Part 2: Creditors with Nonpriority Unsecured Claims Des Moines, IA 50310 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim** Domestic support obligations 6a. 0.00 Total claims from Part 1 Taxes and certain other debts you owe the government 6h 0.00 6h Claims for death or personal injury while you were intoxicated 6с 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e 0.00

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Debtor 1 Timothy M McCombie
Debtor 2 Jennifer L McCombie

Case number (if know)

					Total Claim
Total	6f.	Student loans	6f.	\$_	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$_	18,292.05
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$_	18,292.05

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		1700.111115	III FAUE 22 01 00	
Fill in this inform	mation to identify your	case:		
Debtor 1	Timothy M McCo	mbie		
	First Name	Middle Name	Last Name	
Debtor 2	Jennifer L McCor	mbie		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(ii kilowii)				

#### Official Form 106G

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1		·	•		
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4			<u> </u>	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	- ity		<u> </u>	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_

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		Docume	ent Page 34 d	of 60	
Fill in this	s information to identify your	case:			
Debtor 1	Timethy M McCo	mbia			
Deptor 1	Timothy M McCo	Middle Name	Last Name		
Debtor 2	Jennifer L McCo	mbie			
(Spouse if, fil		Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_					
Case num (if known)	iber			Chook if this is an	
(ii idiowii)				☐ Check if this is an amended filing	
Officia	l Form 106H				
		-1-1			
Sched	dule H: Your Cod	eptors		12/1	15
	e and case number (if known) you have any codebtors? (If			e as a codebtor.	
■ No □ Ye					
Arizor	thin the last 8 years, have you na, California, Idaho, Louisiana  . Go to line 3. s. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)	
3. In Co in line Form	lumn 1, list all of your codeb e 2 again as a codebtor only	ors. Do not include your if that person is a guaran	spouse as a codebtor tor or cosigner. Make	r if your spouse is filing with you. List the person sh sure you have listed the creditor on Schedule D (Off 06G). Use Schedule D, Schedule E/F, or Schedule G	ficial
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	ebt
3.1	Name			□ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
,	Number Street City	State	ZIP Code	_	
					—
3.2	Nama			Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			<u> </u>	
	City	State	ZIP Code		

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Fill	in this information to identify your o	case:									
Del	btor 1 Timothy M	McCombie			_						
1	btor 2 Jennifer L N	<b>McCombie</b>			_						
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		_						
Ca	se number					Chec	k if this is:				
(If kı	nown)				n amende	d filing					
									ng postpetition chollowing date:	napter	
0	fficial Form 106I					N	1M / DD/ Y	YYY			
S	chedule I: Your Inc	ome								12/15	
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment	ur spouse is not filing w On the top of any additi	ith you, do not inclu	de inforr	nati	on abou	your spo	ouse. If m	ore space is ne	eded,	
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse					
	If you have more than one job,	Employment status	■ Employed		■ Emplo	oyed					
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed				
	employers.	Occupation	Trucking				Masseu	ıse			
	Include part-time, seasonal, or self-employed work.	Employer's name	ADM Trucking								
	Occupation may include student	Employer's address									
	or homemaker, if it applies.		Decatur, IL								
		How long employed t	here?				_				
Pai	rt 2: Give Details About Mo	nthly Income									
	imate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. In	clude your non-f	iling	
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	n for all e	mple	oyers for	that perso	on on the li	ines below. If yo	u need	
						For De	otor 1		ebtor 2 or ing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	5	,948.95	\$	424.00		
3	Estimate and list monthly over	time nav		3	<b>2</b> +		0.00	<b>+</b> \$	0.00		

5,948.95

\$

424.00

Calculate gross Income. Add line 2 + line 3.

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Debt Debt		Timothy M McCombie Jennifer L McCombie	_		Case	number (if I	nowi	7)				
					For	Debtor 1				Debtor -filing s		
	Cop	by line 4 here	4.		\$	5,94	8.9	5	\$		424.00	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	1,40	7.2	4	\$		0.00	)
	5b.	Mandatory contributions for retirement plans	5k	٥.	\$		0.0	_	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$_		0.0	0	\$		0.00	 )
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.0	0	\$		0.00	)
	5e.	Insurance	56	€.	\$	30	0.0	0	\$		0.00	)
	5f.	Domestic support obligations	5f		\$		0.0	0	\$		0.00	)
	5g.	Union dues	50	g.	\$_		0.0		\$		0.00	<u>)                                    </u>
	5h.	Other deductions. Specify:	5h	า.+	\$_		0.0	0 -	⊦\$		0.00	<u>)                                    </u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,70	7.2	4	\$		0.00	<u>)                                    </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	4,24	1.7	<u>1</u>	\$		424.00	<u>)                                    </u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.		•				•			
	O.L.	monthly net income.	88		\$_		0.0	_	\$		0.00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			\$_		0.0	_	\$		0.00	_
		settlement, and property settlement.	80		\$_		0.0	_	\$		0.00	_
	8d.	• • •	80		\$_ \$		0.0	_	\$ \$		0.00	
	8e. 8f.	Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	86 e 8f		\$_ \$		0.0		\$ \$		0.00	_
	8g.	Pension or retirement income	8g	g.	\$		0.0	0	\$		0.00	)
	8h.	Other monthly income. Specify: Tax Refunds	8ł	า.+	\$	65	0.0	0 -	+ \$		0.00	<u>)</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	65	0.0	0	\$		0.0	00
10	Cal	culate monthly income. Add line 7 + line 9.	10.	Ф		4,891.71	1.[	Ф.		124.00	= \$	E 21E 71
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		4,031.71	<b> </b> *	Ψ_ —		124.00		5,315.71
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not scify:	r dep			•				Schedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies								12.	\$	5,315.71
13.	Do	you expect an increase or decrease within the year after you file this form	1?								Combi month	ined ly income
		No. Yes Explain:										

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Filli	n this informa	ation to identify yo	our case:						
Debt	tor 1	Timothy M M	<b>IcCombi</b>	e		_		if this is:	
Debt	tor 2 ouse, if filing)	Jennifer L M	cCombie	•			Α		ving postpetition chapter the following date:
Unite	ed States Bankı	ruptcy Court for the:	: NORTH	HERN DISTRICT OF ILLIN	OIS		М	M / DD / YYYY	
	e number nown)								
Of	ficial Fo	orm 106J							
		J: Your I	Exner	ISAS					12/1
Be a	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this					r supplying correct
Part		ribe Your House	hold						
1.	Is this a joir								
	□ No. Go to	o ⊪ne ∠. es Debtor 2 live i	in a conar	ata hausahald?					
			iii a sepai	ate nousenoid?					
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of D	ebtor	2.	
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state dependents				Son				□ No ■ Yes
	acponacino	names.							■ Tes
					Son				■ Yes
					Son				□ No ■ Yes
					Son				□ No ■ Yes
3.		penses include of people other the	han	No					_ 103
		d your depende		Yes					
exp	imate your ex	a date after the b	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance and		government assistance i cluded it on <i>Schedule I: Y</i>				Your expe	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$		1,785.00
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
		erty, homeowner's				4b.			0.00
		e maintenance, re eowner's associat	•	upkeep expenses		4c. 4d.			100.00
5.				oominium dues our residence, such as ho	me equity loans		\$		0.00

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Debtor	•	Case number (if known)			
Debtor	2 Jennifer L McCombie				
6. <b>Ut</b>	ilities:				
6a		6a.	\$	0.00	
6b	. Water, sewer, garbage collection	6b.	\$	0.00	
6c	. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00	
6d	. Other. Specify:	6d.	\$	0.00	
. Fo	od and housekeeping supplies		\$	0.00	
Cr	ildcare and children's education costs	8.	\$	0.00	
. CI	othing, laundry, and dry cleaning	9.	\$	0.00	
). <b>Pe</b>	rsonal care products and services	10.	\$	0.00	
1. <b>M</b> e	edical and dental expenses	11.	\$	0.00	
	ansportation. Include gas, maintenance, bus or train fare. onot include car payments.	12.	\$	0.00	
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00	
	paritable contributions and religious donations	14.	\$	0.00	
	surance.		*	0.00	
	onot include insurance deducted from your pay or included in lines 4 or 20.				
	a. Life insurance	15a.	\$	0.00	
15	b. Health insurance	15b.	\$	0.00	
15	c. Vehicle insurance	15c.	\$	0.00	
	d. Other insurance. Specify:	15d.	\$	0.00	
	<b>xes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.				
	ecify:	16.	\$	0.00	
	stallment or lease payments: a. Car payments for Vehicle 1	170	\$	200.00	
	• •	17a. 17b.	·	200.00	
	b. Car payments for Vehicle 2		*	0.00	
	c. Other. Specify: Student Loans d. Other. Specify:	17c. 17d.	\$	45.00	
	our payments of alimony, maintenance, and support that you did not report a		Ψ	0.00	
	ducted from your pay on line 5, <i>Schedule I, Your Incom</i> e (Official Form 106I)		\$	0.00	
	her payments you make to support others who do not live with you.	,-	\$	0.00	
	ecify:	19.			
0. <b>Ot</b>	her real property expenses not included in lines 4 or 5 of this form or on Sci	hedule I: Yo	ur Income.		
20	a. Mortgages on other property	20a.	\$	0.00	
20	b. Real estate taxes	20b.	\$	0.00	
20	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00	
20	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00	
20	e. Homeowner's association or condominium dues	20e.	\$	0.00	
1. <b>O</b> t	her: Specify:	21.	+\$	0.00	
2. <b>C</b> a	liculate your monthly expenses				
	a. Add lines 4 through 21.		\$	2,130.00	
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	·	
	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,130.00	
	, , ,				
	cliculate your monthly net income.				
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		5,315.71	
23	b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,130.00	
23	c. Subtract your monthly expenses from your monthly income.			0.405.74	
	The result is your monthly net income.	23c.	\$	3,185.71	
24. <b>D</b> o	you expect an increase or decrease in your expenses within the year after	you file this	form?		
Fo	r example, do you expect to finish paying for your car loan within the year or do you expect yo			or decrease because of a	
	dification to the terms of your mortgage?				
	No.				
	Yes. Explain here:				

Fill in thi	s information to identify you	r case:		
Debtor 1	Timothy M McCo	Middle Name	Last Name	
Debtor 2	Jennifer L McCo	mbie		
(Spouse if, fi		Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS	
Case nun	mber			
(if known)				☐ Check if this is an amended filing
	Form 106Dec	lo dividue	d Dabtawa Cabad	
Decia	aration About	<u>an individua</u>	I Debtor's Sched	ules 12/15
	both. 18 U.S.C. §§ 152, 1341, Sign Below			up to \$250,000, or imprisonment for up to 20
Did	you pay or agree to pay som	eone who is NOT an att	orney to help you fill out bankrupt	cy forms?
•	No			
	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
				Dodardion, and Orginatare (Cindian Committee)
	er penalty of perjury, I declare they are true and correct.	e that I have read the su	mmary and schedules filed with th	nis declaration and
х /	s/ Timothy M McCombie		X /s/ Jennifer L McC	Combie
٦	Timothy M McCombie		Jennifer L McCon	nbie
5	Signature of Debtor 1		Signature of Debtor 2	
[	Date <b>November 15, 2016</b>		Date November	15, 2016

Fill	in this inf	ormation to identify your	case:			
Deb	tor 1	Timothy M McCo	ombie			
	_	First Name	Middle Name	Last Name		
	otor 2 use if, filing)	Jennifer L McCo	mbie Middle Name	Last Name		
, .		Donkerinton Court for the	NORTHERN DISTRICT	OE II LINIOIS		
Uni	eu Siales	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Cas (if kn	e number				_	Check if this is an mended filing
Sta	ateme			duals Filing for B		4/16
info num	mation. I ber (if kno	f more space is needed, own). Answer every ques	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
Par			rital Status and Where You	u Lived Before		
1.	What is y	our current marital statu	s?			
	■ Marr	ied married				
2.	During th	e last 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes.	List all of the places you li	ived in the last 3 years. Do n	ot include where you live nov	v.	
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
<b>3.</b> state					nity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes.	Make sure you fill out Sch	nedule H: Your Codebtors (O	Official Form 106H).		
Par	Exp	olain the Sources of You	r Income			
4.	Fill in the	total amount of income you	u received from all jobs and	ng a business during this yeall businesses, including parties together, list it only once u		ndar years?
	□ No					
	Yes.	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		y 1 of current year until filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$23,795.00	■ Wages, commissions, bonuses, tips	\$1,682.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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**Timothy M McCombie** Debtor 1 Jennifer L McCombie Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$71,387.00 \$5,048.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. Describe below. (before deductions each source (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid

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De	Jenniter L McCombie		Cas	e number (# known)				
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on ac	count of a de	bt that benefited a		
	■ No							
	☐ Yes. List all payments to an insider  Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment tor's name		
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.							
	■ No □ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the	e case		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garnisł	ned, attached	, seized, or levied?		
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>							
	Creditor Name and Address	Describe the Property				Value of the property		
		Explain what happened	I					
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No							
	Yes. Fill in the details.  Creditor Name and Address	Describe the action the	creditor took	Date a	Date action was A			
				taken				
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?							
	■ No □ Yes							
Pal	rt 5: List Certain Gifts and Contributions							
		atcy, did you give any gifts	with a total value	of more than \$600	ner nerson?			
10.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No							
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600	Describe the gifts		Dates	you gave	Value		
	per person	Docume the gine		the gif		value		
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankrup  No		s or contributions v	with a total value o	of more than \$	6600 to any charity		
	Yes. Fill in the details for each gift or cor Gifts or contributions to charities that tot		contributed	Dates	VOII	Value		
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	·			buted	Value		
Pa	tt 6: List Certain Losses							

Debtor 1

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Name of trust Description and value of the property transferred Date Transfer was made

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Debtor 1 Timothy M McCombie
Debtor 2 Jennifer L McCombie

Case number (if known)

Pa	t 8: List of Certain Financial Accounts, In	struments, Safe Depos	it Boxes, and Sto	orage Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accourant instrument			Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, an	y safe deposit b	ox or other deposite	ory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the co	ntents	Do you still have it?			
22.	Have you stored property in a storage unit	or place other than you	r home within 1	year before you	iled for bankruptcy	?			
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City,		itents	Do you still have it?			
Pa	rt 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that so for someone.	meone else owns? Inc	ude any propert	y you borrowed	rom, are storing for	r, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the pro	perty	Value			
Pa	rt 10: Give Details About Environmental Inf	,							
	the purpose of Part 10, the following definiti								
	Environmental law means any federal, state toxic substances, wastes, or material into t regulations controlling the cleanup of these	he air, land, soil, surfac	e water, ground						
	Site means any location, facility, or propert to own, operate, or utilize it, including dispersion.		environmental la	aw, whether you	now own, operate,	or utilize it or used			
	Hazardous material means anything an env hazardous material, pollutant, contaminant		as a hazardous	waste, hazardou	s substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings th	at you know about, reg	ardless of when	they occurred.					
24.	Has any governmental unit notified you that	t you may be liable or p	otentially liable	under or in viola	ion of an environm	ental law?			
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it				

Case 16-82688 Doc 1 Filed 11/15/16 Entered 11/15/16 16:33:07 Desc Main Page 45 of 60 Document Debtor 1 **Timothy M McCombie** Debtor 2 Jennifer L McCombie Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Timothy M McCombie /s/ Jennifer L McCombie **Timothy M McCombie** Jennifer L McCombie Signature of Debtor 1 Signature of Debtor 2 Date November 15, 2016 **Date** November 15, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Timothy M McCombie Document Page 46 01 6

Debtor 2 Jennifer L McCombie Case number (if known)

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: November 15, 2016	, appear in court to object.	
Signed:		
/s/ Timothy M McCombie	/s/ Tiffany E. Rodriguez	
Timothy M McCombie	Tiffany E. Rodriguez	
	Attorney for the Debtor(s)	
/s/ Jennifer L McCombie	•	
Jennifer L McCombie		
Debtor(s)		

Do not sign this agreement if the amounts are blank.

**Local Bankruptcy Form 23c** 

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B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In	re	Timothy M M Jennifer L Mo	cCombie			Case No.			
		Jenniner L IVI	Combie		Debtor(s)	Chapter	13		
		DIG	SCI OSURE (	OF COMPENS	ATION OF ATTO	DNEV FOR D	FRTAR(S)		
_	_						, ,		
1.	cor	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
		For legal servi	ces, I have agreed to	accept		\$	4,000.00		
		Prior to the fili	ng of this statement				500.00		
		Balance Due				\$	3,500.00		
2.	The	e source of the co	ompensation paid to	me was:					
		Debtor	☐ Other (spec	ify):					
3.	The	e source of comp	ensation to be paid	to me is:					
		Debtor	☐ Other (spec	ify):					
4.		I have not agree	ed to share the above	e-disclosed compensa	ation with any other perso	n unless they are mer	mbers and associates	of my law firm.	
					n with a person or persons of the people sharing in th			y law firm. A	
5.	In	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
					g advice to the debtor in dont of affairs and plan which		o file a petition in ba	nkruptcy;	
				neeting of creditors a	and confirmation hearing,	and any adjourned he	arings thereof;		
	a.	reaffirma	ons with secured tion agreements	d creditors to redu and applications of liens on house	ice to market value; exas needed; preparation	kemption planninດ n and filing of mo	g; preparation and tions pursuant to	d filing of 11 USC	
		322(1)(2)(	A) for avoluance	of fields off flouse	nolu goods.				
6.	Ву	Represer		tors in any discha	es not include the following argeability actions, jud		ces, relief from s	ay actions or	
				C	CERTIFICATION				
this		ertify that the for kruptcy proceedi	0 0	e statement of any ag	reement or arrangement for	or payment to me for	representation of th	e debtor(s) in	
	Nov	vember 15, 201	6		/s/ Tiffany E. Ro	driguez			
	Date	?			Tiffany E. Rodri Signature of Attorn				
					Barrick, Switzer	, Long, Balsley &	Van Evera, LLP		
					6833 Stalter Dri				
						ax: 815-962-1758			
					Name of law firm			<del></del>	

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#### United States Bankruptcy Court Northern District of Illinois

In re	Timothy M McCombie Jennifer L McCombie		Case No.	
		Debtor(s)	Chapter	13
	VER	RIFICATION OF CREDITOR MA	ATRIX	
		Number of O	Creditors: _	17
	The above-named Debtor(s) h (our) knowledge.	nereby verifies that the list of creditor	ors is true and	correct to the best of my
Date:	November 15, 2016	/s/ Timothy M McCombie		
		Timothy M McCombie Signature of Debtor		
Date:	November 15, 2016	/s/ Jennifer L McCombie Jennifer L McCombie		
		Signature of Debtor		

Advanced Radiology 615 Valley View Drive Suite 202 Moline, IL 61265-6180

Advanced Radiology c/o Quad Corporation PO Box 2020 Davenport, IA 52809

AmeriHome Mortgage Company, LLC PO Box 77404 Trenton, NJ 08628

Business Revenue Systems, Inc. PO Box 13077
Des Moines, IA 50310

Capital One Bank (USA), N.A. PO Box 6492 Carol Stream, IL 60197-6492

Cardmember Service PO Bolx 790084 Saint Louis, MO 63179-0084

CGH Medical Center PO Box 739 Moline, IL 61265

CGH Medical Center 101 E. Miller Road Sterling, IL 61081

FHN Central Business Office PO Box 268 Freeport, IL 61032

FHN Memorial Hospital PO Box 857 Freeport, IL 61032

Hyundai Motor Finance Co. 10550 Talbert Avenue Fountain Valley, CA 92708 J.C. Christensen & Associates, Inc. PO Box 519
Sauk Rapids, MN 56379-0519

Mercy Medical Center Clinton Box 830913 Birmingham, AL 35283

NelNet

New Castle Home Loans 1700 West Cortland Street Suite 207 Chicago, IL 60622

RRCA Accounts Management, Inc. 201 E. 3rd Street Sterling, IL 61081-3611

Thomson Fire Protection Dist. PO Box 260 Mendota, IL 61342-0260